A&E Project Initiation Checklist

Project Title:	Date Requested:
delegated auth	are required for all projects, whether to appoint a design professional or to simply request nority. Items 5 thru 7 are to be provided on a project-by-project basis as applicable. uired items to this completed checklist and forward to State A&E.
1.	Copy of the authorization for this project: (attached) Legislative (bill) Board of Regents CHE President Governor's approval (if required) Other
2.	Type of Project: ☐ Repair/Maintenance ☐ Construction (includes new & remodel) ☐ Short description of work.
3.	Cost Estimated project budget Funding Source (accounting entity and appropriation number required – does not apply if project is delegated, or funds are at A&E)
4.	Delegated Authority: ☐ Yes-Delegated authority is requested for this project. ☐ No-Delegated authority is Not requested for this project.
5.	Professional Design Services: ☐ Short Selection-Request attached. ☐ Yes-Professional design services required-please advertise in quarterly RFP. ☐ No- Do Not advertise for Design services.
6.	If advertisement/selection of design professional is requested in Item 5 above, attach Preliminary Project Program. ☐ Preliminary Project Program attached. ☐ Not required.
7.	Administrative Appropriation: ☐ Request attached. ☐ Not needed.
Approved: (Agency Authority)	Date